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(54) Title: MONOCLONAL ANTIBODIES AND THEIR USE

(57) Abstract

Monoclonal antibodies to the genus *Staphylococcus*, the labelled antibodies, compositions and kits containing them, and their use in diagnosis of antigen and treatment.

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MONOCLONAL ANTIBODIES AND THEIR USE

BACKGROUND OF THE INVENTION

Of current interest in the fields of analysis and diagnosis is the use of monoclonal antibodies to determine the presence of antigens or species in specimens such as urine, blood, water, milk, and the like.

More particularly, monoclonal antibodies specific for the antigens or species of Staphylococci are desired which when used will rapidly diagnose the presence of such organisms in specimens.

Divisions have been made among the Staphylococci species. Some of the representative members include Staphylococcus aureus, Staphylococcus

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epidermidis, Staphylococcus aerogenes, and Staphylococcus lactis. Further, there are many organisms closely related in the Staphylococcus aureus group that are normally identified by typing. They share many common antigens, including the teichoic acid of the cell wall.

Additionally, a variety of toxic substances are produced by Staphylococcus, including hemolysins, leucocidin, coagulase, fibrinolysin, exfoliative toxins (which attack the skin), enterotoxins, pyogenic toxins (a, b, and c), alpha, gamma, and delta toxins. In general, toxin

production is a property of the pathogenic Staphylococci, usually of the aureus variety.

Staphylococci are not only found frequently in all parts of the body in secondary and mixed infections, but they are also primarily responsible for a variety of specific pathologic conditions and for injury to particular organs.

Staphylococcus is the most common cause of abscesses or boils of the skin. They may produce devastating infections and may rapidly destroy the heart valves, leading to death. They can produce overwhelming pneumonia and they are the most common cause of infections of the bone (osteomyelitis) in children and in adults.

A rapid diagnostic agent to detect Staphylococci infection in certain infections would be of great value, particularly in severely septic patients and in progressive infections of the skin, such as cellulitis. Present diagnostic methods include inspection of tissue and gram staining, which may be time consuming and imprecise; or culture methods, which may be slow, in this often rapidly destructive and highly fatal infection. The need for an immediate diagnosis for these infections is considerable and, when applied either as a diagnostic for

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blood infections, for respiratory infections, and even on unusual occasions for urinary tract infections, would be of considerable utility.

The ability of monoclonal antibodies specifically to bind to antigens of Streptococci can provide many opportunities for diagnosis and treatment. Such specificity is a most important requirement for proper and accurate analysis and/or diagnosis, particularly in diagnosing the presence of diseases which require prompt treatment.

A wide variety of isotopic and nonisotopic immunoassays have been utilized in conjunction with monoclonal antibodies to test for the presence of an antigenic substance. At the present time, agglutination, immuno-fluorescent, chemiluminescent or fluorescent immunoassay, immuno-electron microscopy, radiometric assay systems, radio immunoassays, and enzyme-linked immunoassays are the most common techniques used with the monoclonal antibodies. Other techniques include bioluminescent, fluorescence polarization, and photon-counting immunoassays.

When utilizing the enzyme-linked immunoassay procedure (EIA), it is necessary to bind, or conjugate, the monoclonal antibody with an enzyme

capable of functioning in such assay; such as alkaline phosphatase.

The enzyme-linked monoclonal antibody can then be used in the known enzyme-linked immunosorbent assay procedure to determine the presence of an antigenic substance.

After the specific antigen is identified, the serotype of the infecting organism can be determined, and appropriate treatment can then be initiated to rapidly and efficiently eliminate the disease.

The production of monoclonal antibodies is now a well-known procedure first described by Kohler and Milstein (Eur. J. Immunol. 6, 292 (1975)). While the general technique of preparing hybridomas and the resultant monoclonal antibodies is understood, it has been found that preparing a specific monoclonal antibody to a specific antigen is difficult, mainly due to the degree of specificity and variations required in producing a particular hybridoma.

SUMMARY OF THE INVENTION

The present invention provides novel monoclonal antibodies for use in accurately and rapidly diagnosing samples for the presence of Staphylococci antigens and/or organisms.

Briefly stated, the present invention comprises monoclonal antibodies specific for an antigen or species of Staphylococcus; in particular, the antigens or species of Staphylococcus aureus (such as the common antigen), Staphylococcus epidermidis, Staphylococcus aerogenes, Staphylococcus lactis, and the antigens to the Staphylococci toxins such as exfoliative toxins, beta hemolysins, alpha toxins, delta toxins, enterotoxins a to f (inclusive), leucocidin, gamma toxins, pyogenic toxins (a, b, and/or c), as well as a monoclonal antibody broadly cross-reactive with an antigen for each species of the genus Staphylococcus.

The invention also comprises labeled monoclonal antibodies for use in diagnosing the presence of the Staphylococci antigens, each comprising a monoclonal antibody against one of the above-mentioned antigens to Staphylococci or to a particular species or toxin thereof and linked thereto an appropriate label. The label can be chosen from the group consisting of a radioactive isotope, enzyme, fluorescent compound, chemiluminescent compound, bioluminescent compound, ferromagnetic atom, or particle, or any other label.

The invention further comprises the process for diagnosing the presence of Staphylococci antigens, organisms, or toxins in a specimen comprising contacting said specimen with the labeled monoclonal antibody in an appropriate immunoassay procedure.

Additionally, the invention is also directed to a therapeutic composition comprising a monoclonal antibody for an antigen or toxin of Staphylococcus and a carrier or diluent, as well as kits containing at least one labeled monoclonal antibody to an antigen or toxin of Staphylococcus.

DETAILED DESCRIPTION

The monoclonal antibodies of the present invention are prepared by fusing spleen cells, from a mammal which has been immunized against the particular Staphylococcus antigen, with an appropriate myeloma cell line, preferably NS0 (uncloned), P3NS1-Ag4/1, or Sp2/0 Ag14. The resultant product is then cultured in a standard HAT (hypoxanthine, aminopterin, and thymidine) medium. Screening tests for the specific monoclonal antibodies are employed utilizing immunoassay techniques which will be described below.

The immunized spleen cells may be derived

from any mammal, such as primates, humans, rodents (i.e., mice, rats, and rabbits), bovine, ovine, canine, or the like, but the present invention will be described in connection with mice. The mouse is first immunized by injection of the particular Staphylococcus antigen chosen generally for a period of approximately eleven weeks. When the mouse shows sufficient antibody production against the antigen, as determined by conventional assay, it is given a booster injection of the appropriate Staphylococcus antigen, and then killed so that the immunized spleen may be removed. The fusion can then be carried out utilizing immunized spleen cells and an appropriate myeloma cell line.

The fused cells yielding an antibody which give a positive response to the presence of the particular Staphylococcus antigen are removed and cloned utilizing any of the standard methods. The monoclonal antibodies from the clones are then tested against standard antigens to determine their specificity for the particular Staphylococcus antigen. The monoclonal antibody selected, which is specific for the particular Staphylococcus antigen, species, or toxin is then bound to an appropriate label.

Amounts of antibody sufficient for labeling and subsequent commercial production are produced by the known techniques, such as by batch or continuous tissue culture or culture in vivo in mammals, such as mice.

The monoclonal antibodies may be labeled with a multitude of different labels, such as enzymes, fluorescent compounds, luminescent compounds, radioactive compounds, ferromagnetic labels, and the like. The present invention will be described with reference to the use of an enzyme labeled monoclonal antibody. Some of the enzymes utilized as labels are alkaline phosphatase, glucose oxidase, galactosidase, peroxidase, or urease, and the like.

Such linkage with enzymes can be accomplished by any one of the conventional and known methods, such as the Staphylococcal Protein A method, the glutaraldehyde method, the benzoquinone method, or the periodate method.

Once the labeled monoclonal antibody is formed, testing is carried out employing one of a wide variety of conventional immunoassay methods. The particular method chosen will vary according to the monoclonal antibody and the label chosen. At the present time, enzyme

immunoassays are preferred due to their low cost, reagent stability, safety, sensitivity, and ease of procedure. One example is enzyme-linked immunosorbent assay (EIA). EIA is a solid phase assay system which is similar in design to the radiometric assay, but which utilizes an enzyme in place of a radioactive isotope as the immunoglobulin marker.

Fluorescent-immunoassay is based on the labeling of antigen or antibody with fluorescent probes. A nonlabeled antigen and a specific antibody are combined with identical fluorescently labeled antigen. Both labeled and unlabeled antigen compete for antibody binding sites. The amount of labeled antigen bound to the antibody is dependent upon, and therefore a measurement of, the concentration of nonlabeled antigen. Examples of this particular type of fluorescent-immunoassay would include heterogenous systems such as Enzyme-Linked Fluorescent Immunoassay, or homogeneous systems such as the Substrate Labeled Fluorescent Immunoassay. The most suitable fluorescent probe, and the one most widely used is fluorescein. While fluorescein can be subject to considerable interference from scattering, sensitivity can be increased by

the use of a fluorometer optimized for the probe utilized in the particular assay and in which the effect of scattering can be minimized.

In fluorescence polarization, a labeled sample is excited with polarized light and the degree of polarization of the emitted light is measured. As the antigen binds to the antibody its rotation slows down and the degree of polarization increases. Fluorescence polarization is simple, quick, and precise. However, at the present time its sensitivity is limited to the micromole per liter range and upper nanomole per liter range with respect to antigens in biological samples.

Luminescence is the emission of light by an atom or molecule as an electron is transferred to the ground state from a higher energy state. In both chemiluminescent and bioluminescent reactions, the free energy of a chemical reaction provides the energy required to produce an intermediate reaction or product in an electronically excited state. Subsequent decay back to the ground state is accompanied by emission of light. Bioluminescence is the name given to a special form of chemiluminescence found in biological systems, in which a catalytic protein or enzyme,

such as luciferase, increases the efficiency of the luminescent reaction. The best known chemiluminescent substance is luminol.

A further aspect of the present invention is a therapeutic composition comprising one or more of the monoclonal antibodies to the particular Staphylococcus antigen, species, or toxin, as well as a pharmacologically acceptable carrier or diluent. Such compositions can be used to treat humans and/or animals afflicted with some form of Staphylococci infections and they are used in amounts effective to cure; an amount which will vary widely dependent upon the individual being treated and the severity of the infection.

One or more of the monoclonal antibodies can be assembled into a diagnostic kit for use in diagnosing for the presence of antigens, toxins, or species of Staphylococci in various specimens. It is also possible to use the broadly cross-reactive monoclonal antibody which can identify the genus Staphylococcus alone or as part of a kit containing antibodies that can identify other bacterial genera or species of Staphylococcus and/or other toxins.

In the past there have been difficulties

in developing rapid kits because of undesirable cross-reactions of specimens with antiserum. The use of monoclonal antibodies can eliminate these problems and provide highly specific and rapid tests for diagnosis. A rapid and precise kit could replace or augment existing tests and permit early direct therapy using precise antibiotics. Avoiding multiple antibiotics or more expensive or hazardous antibiotics would represent substantial patient and hospital savings. Additionally, a kit can be used on an out-patient basis. At present the lack of a rapid test giving "same day" answers may delay the initiation of treatment until the patient has developed more severe symptoms or may require the initiation of more costly therapy in a sick patient. A test that would return results within an hour or two would be a substantial convenience to patients.

In addition to being sold individually, the kit could be included as a component in a comprehensive line of compatible immunoassay reagents sold to reference laboratories to detect the species and serotypes of Staphylococci.

One preferred embodiment of the present invention is a diagnostic kit comprising at

least one labeled monoclonal antibody against a particular Staphylococcus antigen, toxin, or species, as well as any appropriate stains, counterstains, or reagents. Further embodiments include kits containing at least one control sample of a Staphylococcus antigen and/or a cross-reactive labeled monoclonal antibody which would detect the presence of any of the Staphylococci organisms or toxins in a particular sample. Specific antigens to be detected in this kit include the antigens of Staphylococcus aureus, S. epidermidis, S. aerogenes, S. lactis, and the antigens to the Staphylococci toxins such as exfoliative toxins, beta hemolysins, alpha toxins, delta toxins, enterotoxins a to f (inclusive), leucocidin, gamma toxins, and pyogenic toxins (a, b, and/or c).

Monoclonal diagnostics which detect the presence of Staphylococci antigens can also be used in periodic testing of water sources, food supplies and food processing operations. Thus, while the present invention describes the use of the labeled monoclonal antibodies to determine the presence of a standard antigen, the invention can have many applications in diagnosing the presence of antigens by determining

whether specimens such as urine, blood, stool, water or milk contain the particular Staphylococcus antigen. More particularly, the invention could be utilised as a public health and safety diagnostic aid, whereby specimens such as water or food could be tested for possible contamination.

The invention will be further illustrated in connection with the following Examples which are set forth for the purposes of illustration only and not by way of limitation.

In the Examples:

DMEM = Dulbecco's Modified Eagles Medium

FCS = Foetal Calf Serum

PBS = phosphate-buffered saline

15 CFA = Complete Freunds Adjuvant

% T refers to vaccine concentration measured in a 1 cm light path

Monoclonal antibodies of the present invention are prepared generally according to the method of Kohler and 20 Milstein, Eur. J. Immunol. 6, (1975) 292.

EXAMPLE 1

A. Antigen Preparation

Antigen (Staphylococcus aureus) is obtained from the National Collection of Type Cultures, strain title NCTC 25 8532. "Dead" organisms were prepared by growing the bacteria in Tryptone Soya Broth in CO₂ and harvesting; the organisms were washed in saline by repeated centrifugation and were finally resuspended in formol saline. "Live" organisms were prepared in blood agar and 30 suspended in PBS.

B. Animal Immunisation

Balb/c mice are injected with each preparation of the antigen. They are given an intramuscular injection (0.05 ml 80% T vaccine) of vaccine (in CFA). The mice are bled approximately six days after the last injection

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and the serum tested for antibodies by assay. A conventional assay used for this serum titer testing is the enzyme-linked immunosorbent assay system. When the mice show antibody production after this regimen, 5 generally a positive titer of at least 10,000, a mouse is selected as a fusion donor and given a booster injection (0.02 ml 80% T vaccine) intravenously, three days prior to splenectomy.

C. Cell Fusion

10 Spleen cells from the immune mice are harvested three days after boosting, by conventional techniques. First, the donor mouse selected is killed and surface-sterilised by immersion in 70% ethyl alcohol. The spleen is then removed and immersed in approximately 15 2.5 ml DMEM to which has been added 3% FCS. The spleen is then gently homogenised in a LUX homogenising tube until all cells have been released from the membrane, and the cells are washed in 5 ml 3% FCS-DMEM. The cellular debris is then allowed to settle and the spleen cell 20 suspension placed in a 10 ml centrifuge tube. The debris is then reashed in 5 ml 3% FCS-DMEM. 50 ml suspension are then made in 3% FCS-DMEM.

The myeloma cell line used is NS0 (uncloned), obtained from the MRC Laboratory of Molecular Biology in 25 Cambridge, England. The myeloma cells are in the log growth phase, and rapidly dividing. Each cell line is washed using, as tissue culture medium, DMEM containing 3% FCS.

The spleen cells are then spun down at the same time 30 that a relevant volume of myeloma cells are spun down (room temperature for 7 minutes at 600 g), and each resultant pellet is then separately resuspended in 10 ml 3% FCS-DMEM. In order to count the myeloma cells, 0.1 ml of the suspension is diluted to 1 ml and a haemacytometer 35 with phase microscope is used. In order to count the

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spleen cells, 0.1 ml of the suspension is diluted to 1 ml with Methyl Violet-citric acid solution, and a haemacytometer and light microscope are used to count the stained nuclei of the cells.

- 5 1×10^8 Spleen cells are then mixed with 5×10^7 myeloma cells, the mixture washed in serum-free DMEM high in glucose, and centrifuged, and all the liquid removed. The resultant cell pellet is placed in a 37°C water-bath. 1 ml of a 50 w/v solution of polyethylene glycol 1500
- 10 (PEG) in saline Hepes, pH approximately 7.5, is added, and the mixture gently stirred for approximately 1.5 minutes. 10 ml serum-free tissue culture medium DMEM are then slowly added, followed by up to 50 ml of such culture medium, centrifugation and removal of all the
- 15 supernatant, and resuspension of the cell pellet in 10 ml of DMEM containing 18% by weight FCS.

10 μ l of the mixture are placed in each of 480 wells of standard multiwell tissue culture plates. Each well contains 1.0 ml of the standard HAT medium (hypoxanthine, 20 aminopterin and thymidine) and a feeder layer of Balb/c macrophages at a concentration of 5×10^4 macrophages/well.

The wells are kept undisturbed, and cultured at 37°C in 9% CO₂ air at approximately 100% humidity. The wells 25 are analysed for growth, utilising the conventional inverted microscope procedure, after about 5 to 10 days. In those wells in which growth is present in the inhibiting HAT medium, screening tests for the specific monoclonal antibody are made utilising the conventional 30 enzyme immunoassay screening method described below. Somewhere around 10 days to 14 days after fusion, sufficient antibody against the antigen may develop in at least one well.

D. Cloning

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From those wells which yielded antibody against the antigen, cells are removed and cloned using the dilution method. In limiting dilution, dilutions of cell suspensions in 18% FCS-DMEM + Balb/c mouse macrophages 5 were made to achieve 1 cell/well and half cell/well in a 96-well microtitre plate. The plates were incubated for 7-14 days at 37 C, 95% RH, 7-9% CO₂ until semi-confluent. The supernatants were then assayed for specific antibody by the standard enzyme immunoassay.

10 The clones may be assayed by the enzyme immunoassay method to determine antibody production.

E. Monoclonal Selection

The monoclonal antibodies from the clones are screened by the standard techniques for binding to the 15 antigen, prepared as in the immunisation, and for specificity in a test battery of the class bearing different antigens. Specifically, a grid of microtiter plates containing a representative selective of organisms is prepared, boiled, and utilised as a template to define 20 the specificity of the parent group. The EIA immunoassay noted above may be used.

F. Antibody Production and Purification (2 alternatives)

(1) Six Balb/c mice are primed with pristane and injected intraperitoneally with 10⁷ cells of the 25 monoclonal antibody specific against the antigen. The ascites fluid is harvested after the mice have reached the proper stage; the mice are swollen with fluid but still alive.

The cells are then centrifuged at 1200 g for 30 approximately 10 minutes, the cells discarded, and the antibody-rich ascites fluid collected. The fluid is titrated, as noted above, to establish presence and level of antibody, and purified.

Purification is accomplished using the protein A - 35 Sepharose method. More particularly, about 10 ml of the

ascites fluid are filtered through glass wool and centrifuged at 30,000 g for 10 minutes. The ascites is then diluted with twice its own volume of cold phosphate buffer (0.1 M sodium phosphate, pH 8.2). The diluted 5 ascites is loaded on to a 2 ml column of protein A - Sepharose which has previously been equilibrated with phosphate buffer. The column is washed with 40 ml phosphate buffer, and the monoclonal antibody is eluted with citrate buffer (0.1 M sodium citrate, pH 3.5) into 10 sufficient 1M tris buffer, pH 9.0, to raise the pH immediately to about 7.5. The eluate is dialysed in 2 x 1000 ml PBS at +4°C.

(2) Cells of the monoclonal antibody-producing line specific to Staphylococcus aureus are grown in batch 15 tissue culture. DMEM, to which has been added 10% FCS, is used to support growth in mid-log phase, to 1 litre volume. The culture is allowed to overgrow, to allow maximum antibody production. The culture is then centrifuged at 1200 g for approximately 10 minutes. The 20 cell/cell debris is discarded and the antibody-rich supernatant collected.

The fluid may then be titrated, as noted above, to establish presence and level of antibody, and purified by a combination of batch ion-exchange chromatography, 25 ammonium sulphate precipitation and column ion-exchange (a possible alternative would be protein A - Sepharose) chromatography.

More particularly, to one litre of culture supernatant is added one litre of 0.05M sodium acetate 30 buffer, pH 4.5, and 40 ml of SP-Sephadex, previously equilibrated in 0.1M sodium acetate buffer, pH 5.0. The suspension is stirred at +4°C for one hour. The SP-Sephadex is allowed to settle and the supernatant is decanted. The SP-Sephadex is packed in a column, washed 35 with 60 ml of 0.1M acetate buffer, pH 5.0, and eluted

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with 60 ml of the same buffer plus 1M sodium chloride. The eluate is stirred at +4°C, and an equal volume of saturated ammonium sulphate added slowly. The suspension is stirred for a further 30 minutes. The precipitate is 5 then harvested by centrifugation at 10,000 g for 10 minutes. The precipitate is dissolved in a minimum volume of either cold phosphate/EDTA buffer (20mM sodium phosphate, 10mM EDTA, pH 7.5, + 0.02% sodium azide) for DEAE-cellulose chromatography, or phosphate buffer (0.1M 10 sodium phosphate, pH 8.2 + 0.02% sodium azide) for protein A-Sepharose chromatography. The dissolved precipitate is dialysed versus 2 x 1000 ml of the dissolution buffer at +4°C, and the appropriate chromatography step carried out as previously described.

15 G. Enzyme-Monoclonal Linkage

The monoclonal antibody specific against the antigen, prepared as above, is linked to an enzyme, viz. highly-purified alkaline phosphatase. The one-step glutaraldehyde method or benzoquinone conjugation is 20 used.

In the one-step glutaraldehyde method, 3 mg monoclonal antibody (in about 1 ml of solution) are dialysed with 10 mg alkaline phosphatase (Sigma Type VII-T) against 2 x 1000 ml of PBS, pH 7.4, at +4°C. 25 After dialysis, the volume is made up to 2.5 ml with PBS, and 25 µl of a 20% glutaraldehyde in PBS solution are added. The conjugation mixture is left at room temperature for 1.5 hours. After this time, glutaraldehyde is removed by gel filtration on a 30 Pharmacia PH-10 (Sephadex G-25 M) column, previously equilibrated in PBS. The conjugate is eluted with 3.5 ml PBS and then dialysed against 2 x 2000 ml of TRIS buffer (50 mM TRIS, 1 mM magnesium chloride, pH 8.0, plus 0.02% sodium azide) at +4°C. To the dialysed conjugate is 35 added 1/10th its own volume of 10% BSA in TRIS buffer.

The conjugate is then sterile-filtered through a 0.22 μm membrane filter into a sterile amber vial and stored at +4°C.

EXAMPLE 2

5 The procedure of Example 1 was followed, in most respects. The antigen was Staphylococcus epidermidis NCTC 11047. Animals were immunised intramuscularly in CFA and, after 4 weeks, intravenously.

EXAMPLE 3

10 The procedure of Example 1 was followed, but using, as the antigen, Staphylococcus toxic shock syndrome toxin obtained as purified antigen from Dublin. Immunisation comprised im (in CFA) and, four months later, iv (in saline) injections.

EXAMPLE 4

The general procedure of Example 1 may be followed to produce a monoclonal antibody broadly cross-reactive with an antigen of all species of the genus Staphylococcus.

20 Tests using the present invention are superior to existing tests, based on the following advantages: (i) greater accuracy; (ii) same day results, within an hour or two; (iii) reduction in amount of skilled labour required to administer laboratory procedures, resulting
25 in reduced labour costs; (iv) reduction in laboratory time and space used in connection with tests, resulting in reduced overhead expenses; and (v) improved therapy based upon early, precise diagnosis.

While the invention has been described in connection
30 with certain preferred embodiments, it is not intended to limit the scope of the invention to the particular form set forth but, on the contrary, it is intended to cover such alternatives, modifications, and equivalents as may be included within the spirit and scope of the invention
35 as defined by the appended claims.

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WHAT IS CLAIMED IS:

1. A monoclonal antibody specific for an antigen or species of Staphylococcus.

2. The antibody of Claim 1 specific to the antigen or common antigens of Staphylococcus aureus.

3. The antibody of Claim 1 specific to the antigen or antigens of Staphylococcus epidermidis.

4. The antibody of Claim 1 specific to the antigen or antigens of Staphylococcus aerogenes.

5. The antibody of Claim 1 specific to the antigen or antigens of Staphylococcus lactis.

6. The antibody of Claim 1 specific to the antigen or antigens of the Staphylococci exfoliative toxins.

7. The antibody of Claim 1 specific to the antigen or antigens of the Staphylococci beta hemolysins.

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8. The antibody of Claim 1 specific to the antigen or antigens of the Staphylococci alpha toxins.

9. The antibody of Claim 1 specific to the antigen or antigens of the Staphylococci delta toxins.

10. The antibody of Claim 1 specific to the antigen or antigens of the Staphylococci enterotoxin a, b, c or d.

11. The antibody of Claim 1 specific to the antigen or antigens of the Staphylococci epidermylytic toxin A.

12. The antibody of Claim 1 specific to the antigen or antigens of the Staphylococci epidermylytic toxin B.

13. The antibody of Claim 1 specific to the antigen or antigens of the Staphylococcus toxic shock syndrome toxin.

14. The antibody of Claim 1 specific to the antigen or antigens of the Staphylococci

enterotoxin e.

15. The antibody of Claim 1 specific to the antigen or antigens of the Staphylococci enterotoxin f.

16. The antibody of Claim 1 specific to the antigen or antigens of the Staphylococci leucocidin toxin.

17. The antibody of Claim 1 specific to the antigen or antigens of the Staphylococci gamma toxins.

18. The antibody of Claim 1 specific to the antigen or antigens of the Staphylococci pyogenic toxins.

19. A monoclonal antibody broadly cross-reactive with an antigen of all species of the genus Staphylococcus.

20. A labeled monoclonal antibody consisting essentially of a monoclonal antibody of Claims 1-19 and an appropriate label.

21. The labeled monoclonal antibody of Claim 20, wherein said label is a member of the group selected from a radioactive isotope, enzyme, fluorescent compound, bioluminescent compound, chemiluminescent compound, or ferromagnetic atom, or particle.

22. The labeled monoclonal antibody of Claim 21, wherein said label is an enzyme capable of conjugating with a monoclonal antibody and of being used in an enzyme-linked immunoassay procedure.

23. The labeled monoclonal antibody of Claim 22, wherein said enzyme is alkaline phosphatase, glucose oxidase, galactosidase, or peroxidase.

24. The labeled monoclonal antibody of Claim 21, wherein said label is a fluorescent compound or probe capable of being used in an immuno-fluorescent or fluorescent immunoassay procedure, enzyme fluorescent immunoassay, or fluorescence polarization immunoassay, photon counting immunoassay, or the like procedure.

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25. The labeled monoclonal antibody of Claim 24, wherein said fluorescent compound or probe is fluorescein.

26. The labeled monoclonal antibody of Claim 21, wherein said label is a chemiluminescent compound capable of being used in a luminescent or enzyme-linked luminescent immunoassay.

27. The labeled monoclonal antibody of Claim 26, wherein such chemiluminescent compound is luminol or a luminol derivative.

28. The labeled monoclonal antibody of Claim 21, wherein said label is a bioluminescent compound capable of being used in an appropriate bioluminescent immunoassay.

29. The labeled monoclonal antibody of Claim 28, wherein such bioluminescent compound is luciferase or a luciferase derivative.

30. A process for diagnosing for the presence of an antigen of Staphylococcus in a specimen comprising contacting at least a portion of said specimen with a labeled monoclonal anti-

body of Claim 20 in an immunoassay procedure appropriate for said label.

31. The process of Claim 30, wherein the appropriately labeled immunoassay procedure is selected from immuno-fluorescent or fluorescent immunoassay, immuno-electron microscopy, radio-metric assay systems, enzyme-linked immunoassays, fluorescence polarization, photon-counting bioluminescent, or chemiluminescent immunoassay.

32. The process of Claim 31, wherein said label is an enzyme capable of being used in an enzyme-linked immunoassay procedure.

33. The process of Claim 32, wherein said enzyme is selected from alkaline phosphatase, glucose oxidase, galactosidase, or peroxidase.

34. The process of Claim 31, wherein said label is a fluorescent compound or probe capable of being used in an immuno-fluorescent or fluorescent immunoassay procedure, enzyme fluorescent immunoassay, or fluorescence polarization immunoassay, or photon-counting immunoassay, or the like procedure..

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35. The process of Claim 34, wherein said fluorescent compound or probe is fluorescein.

36. The process of Claim 31, wherein said label is a chemiluminescent compound capable of being used in a luminescent or enzyme-linked luminescent immunoassay.

37. The process of Claim 36, wherein said chemiluminescent compound is luminol or a luminol derivative.

38. The process of Claim 31, wherein said label is a bioluminescent compound capable of being used in a bioluminescent or enzyme-linked bioluminescent immunoassay.

39. The process of Claim 38, wherein said bioluminescent compound is luciferase or a luciferase derivative.

40. A therapeutic composition comprising one or more of the monoclonal antibodies in Claims 1-19 and a pharmaceutically acceptable carrier or diluent.

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41. A therapeutic composition comprising one or more of the labeled monoclonal antibodies in Claim 20 and a pharmaceutically acceptable carrier or diluent.

42. A method of treating Staphylococci infections comprising administering an effective amount of a monoclonal antibody of Claims 1-19.

43. A kit for diagnosing for the presence of an antigen or species of Staphylococcus in a diagnostic specimen comprising at least one monoclonal antibody of Claims 1-19.

44. The kit of Claim 43, wherein said at least one antibody is labeled.

45. The kit of Claim 44, wherein said at least one monoclonal antibody is labeled with a fluorescent compound.

46. The kit as in Claim 44, wherein said at least one monoclonal antibody is labeled with an enzyme.

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47. The kit as in Claim 44, wherein said at least one monoclonal antibody is labeled with a member of the group consisting of a radioactive isotope, chemiluminescent compound, bioluminescent compound, ferromagnetic atom, or particle.

48. The kit of Claims 44, 45, 46, and 47 additionally containing at least one known Staphylococcus antigen as a control.

49. The kit of Claims 44, 45, 46, 47, and 48 containing each known antigen of Staphylococcus aureus, Staphylococcus epidermidis, Staphylococcus aerogenes, and/or Staphylococcus lactis.

50. The kit of Claims 44, 45, 46, 47, and 48 containing the antigen or antigens of the Staphylococci exfoliative toxins, beta hemolysins, alpha toxins, delta toxins, enterotoxins a to f (inclusive), leucocidin, gamma toxins, and/or pyogenic toxins.

51. A kit for diagnosing for the presence of an antigen or species of Staphylococcus in a diagnostic specimen comprising at least one

monoclonal antibody of Claims 1-19 and a control.

52. The kit of Claim 51, wherein said at least one antigen is labeled and said control is at least one known antigen of Staphylococcus.

53. A kit for diagnosing for the presence of a Staphylococci infection comprising at least one monoclonal antibody of Claims 1-19.

54. The kit of Claim 53, wherein said at least one monoclonal antibody is labeled.

INTERNATIONAL SEARCH REPORT

International Application No PCT/GB 85/00469

I. CLASSIFICATION OF SUBJECT MATTER (If several classification symbols apply, indicate all) *

According to International Patent Classification (IPC) or to both National Classification and IPC

IPC⁴ C 07 K 15/00; C 12 P 21/00; G 01 N 33/577; G 01 N 33/569;
IPC: A 61 K 39/40 // C 12 N 15/00; (C 12 P 21/00, C 12 R 1:91)

II. FIELDS SEARCHED

| Classification System | Minimum Documentation Searched ? | |
|------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|------------------------|
| | | Classification Symbols |
| IPC ⁴ | C 12 P G 01 N A 61 K | |
| Documentation Searched other than Minimum Documentation to the Extent that such Documents are Included in the Fields Searched * | | |

III. DOCUMENTS CONSIDERED TO BE RELEVANT *

| Category * | Citation of Document, ¹¹ with indication, where appropriate, of the relevant passages ¹² | Relevant to Claim No. ¹³ |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| X | Chemical Abstracts, volume 100, no. 13, 26 March 1984, Columbus, Ohio, (US) R.F. Meyer et al.: "Development of a monoclonal antibody capable of interacting with five serotypes of <i>Staphylococcus aureus</i> enterotoxin", see page 518, abstract no. 101761n & Appl. Environ. Microbiol. 1984, 47(2), 283-7 (Eng) | 1,2,10,14, 19 |
| Y | --- | 3-9,11-13, 15-18,20-39, 43-54 |
| X | Chemical Abstracts, volume 101, no. 7, 13 August 1984, Columbus, Ohio, (US) N.E. Thompson et al.: "Monoclonal antibodies to staphylococcal enterotoxins B and C: cross-reactivity and localization of epitopes on tryptic fragments", see page 457, abstract no. 52982v & Infect. Immun. 1984, 45(1), 281-5 (Eng) | 1,2,10 |
| Y | --- | 3-9,11-19, 20-39,43-54 |
| | | ./. |

* Special categories of cited documents: ¹⁰

- "A" document defining the general state of the art which is not considered to be of particular relevance
- "E" earlier document but published on or after the International filing date
- "L" document which may throw doubts on priority claim(s) or which is cited to establish the publication date of another citation or other special reason (as specified)
- "O" document referring to an oral disclosure, use, exhibition or other means
- "P" document published prior to the International filing date but later than the priority date claimed

"T" later document published after the International filing date or priority date and not in conflict with the application but cited to understand the principle or theory underlying the invention

"X" document of particular relevance; the claimed invention cannot be considered novel or cannot be considered to involve an inventive step

"Y" document of particular relevance; the claimed invention cannot be considered to involve an inventive step when the document is combined with one or more other such documents, such combination being obvious to a person skilled in the art

"Z" document member of the same patent family

IV. CERTIFICATION

Date of the Actual Completion of the International Search
31st January 1986

Date of Mailing of this International Search Report

19 FEV. 1986

International Searching Authority

EUROPEAN PATENT OFFICE

Signature of Authorized Officer

M. VAN MOL

| III. DOCUMENTS CONSIDERED TO BE RELEVANT (CONTINUED FROM THE SECOND SHEET) | | |
|----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| Category * | Citation of Document, with indication, where appropriate, of the relevant passages | Relevant to Claim No |
| X | EP, A, 0105804 (THE UNIVERSITY OF ROCHESTER) 18 April 1984, see claims 1-3, 42, 45, 46, 50; page 23, lines 10-27; page 24, table I; page 26, lines 26-27; page 32, line 17 - page 33, line 12 | 1, 2, 40, 41 |
| Y | Chemical Abstracts, volume 93, no. 7, 18 August 1980, Columbus, Ohio, (US) Ichiman Yoshitoshi et al.: "Immunological response and protective antibody production to a strain of <i>Staphylococcus epidermidis</i> in rabbit", see page 712, abstract no. 68444y & Sei Marianna Ika Daigaku Zasshi 1979, 7(2), 141-5 (Japan) | 3, 39, 43-54 |
| Y | Chemical Abstracts, volume 100, no. 21, 21 May 1984, Columbus, Ohio, (US) Igarashi, Hideo et al. : "Purification and characterization of <i>Staphylococcus aureus</i> FRI 1169 and 587 toxic shock syndrome exotoxins", see page 199, abstract no. 169662m & Infect. Immun. 1984, 44(1), 175-81 (Eng) | 3-9, 11-13, 15-18, 20- 39, 43-54 |
| Y | US, A, 4461829 (A.C. GREENQUIST) 24 July 1984, see claims 1-3; column 2, lines 8-40; column 10, lines 17-26 and 51 | 20-39, 43- 54 |

FURTHER INFORMATION CONTINUED FROM THE SECOND SHEET

V. OBSERVATIONS WHERE CERTAIN CLAIMS WERE FOUND UNSEARCHABLE :

This International search report has not been established in respect of certain claims under Article 17(2) (a) for the following reasons:

1. Claim numbers 42, because they relate to subject matter not required to be searched by this Authority, namely:

Methods for treatment of the human or animal body by surgery or therapy, as well as diagnostic methods (PCT Rule 39.1(iv))

2. Claim numbers _____, because they relate to parts of the International application that do not comply with the prescribed requirements to such an extent that no meaningful international search can be carried out, specifically:

3. Claim numbers _____, because they are dependent claims and are not drafted in accordance with the second and third sentences of PCT Rule 6.4(a).

VI. OBSERVATIONS WHERE UNITY OF INVENTION IS LACKING :

This International Searching Authority found multiple inventions in this International application as follows:

1. As all required additional search fees were timely paid by the applicant, this International search report covers all searchable claims of the International application.

2. As only some of the required additional search fees were timely paid by the applicant, this International search report covers only those claims of the International application for which fees were paid, specifically claims:

3. No required additional search fees were timely paid by the applicant. Consequently, this International search report is restricted to the invention first mentioned in the claims; it is covered by claim numbers:

4. As all searchable claims could be searched without effort justifying an additional fee, the International Searching Authority did not invite payment of any additional fee.

Remark on Protest

The additional search fees were accompanied by applicant's protest.
 No protest accompanied the payment of additional search fees.

ANNEX TO THE INTERNATIONAL SEARCH REPORT ON

INTERNATIONAL APPLICATION NO. PCT/GB 85/00469 (SA 10953)

This Annex lists the patent family members relating to the patent documents cited in the above-mentioned international search report. The members are as contained in the European Patent Office EDP file on 12/02/86

The European Patent Office is in no way liable for these particulars which are merely given for the purpose of information.

| Patent document cited in search report | Publication date | Patent family member(s) | Publication date |
|----------------------------------------------|---------------------|----------------------------|---------------------|
| EP-A- 0105804 | 18/04/84 | None | |
| US-A- 4461829 | 24/07/84 | CA-A- 1190461 | 16/07/85 |

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